| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF OHIO | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| rt 1: Identify Yourself | | | | |
|---|---|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| Your full name | | | | |
| Write the name that is on your government-issued picture identification (for example, your driver's | John First name C. | First name | | |
| ilcense or passport). | Middle name | Middle name | | |
| Bring your picture identification to your meeting with the trustee. | Sullivan Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | | |
| All other names you have used in the last 8 years | | | | |
| Include your married or maiden names. | | | | |
| Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4465 | | | |
| | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Sullivan Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number xxx-xx-4465 | | |

Debtor 1 **John C. Sullivan**

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | |
| | | EINS | EINs | | |
| 5. | Where you live | 9240 Milford Dr. Northfield, OH 44067 | If Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Summit County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. Why you are choosing this district to file for bankruptcy | | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

| 7. | The chapter of the Bankruptcy Code you are | | | description of each, see Notice Required by to the top of page 1 and check the appropria | y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box. | | | |
|---|---|-------------|---------------------------------------|--|--|--|--|--|
| | choosing to file under | ■ Chapter 7 | | | | | | |
| | | ☐ Ch | apter 11 | | | | | |
| | | ☐ Ch | apter 12 | | | | | |
| | | □ Ch | apter 13 | | | | | |
| 8. | How you will pay the fee | | about how you | ay pay. Typically, if you are paying the fee yrney is submitting your payment on your be | ock with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with | | | |
| | | | | | ion, sign and attach the Application for Individuals to Pay | | | |
| The Filing Fee in Installments (Official Form 103 | | | | | on only if you are filing for Chapter 7. By law, a judge may, | | | |
| | | | but is not requing applies to your | d to, waive your fee, and may do so only if y mily size and you are unable to pay the fee | your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition. | | | |
|) . | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | | |
| | | | District | When | Case number | | | |
| | | | District | When | Case number | | | |
| | | | District | When | Case number | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | | |
| | | | Debtor | | Relationship to you | | | |
| | | | District | When | Case number, if known | | | |
| | | | Debtor | | Relationship to you | | | |
| | | | District | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No | Go to line | 12. | | | | |
| | residence : | ☐ Yes | s. Has your | andlord obtained an eviction judgment agair | nst you? | | | |
| | | | □ N | . Go to line 12. | | | | |
| | | | | | | | | |

public health or safety? Or do you own any

property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed. or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Official Form 101

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Debtor 1 John C. Sullivan Case number (if known)

| Part | 6: Answer These Questi | ons for Re | porting Purposes | | | | | |
|------|---|--|---|--|---|---|--|--|
| 16. | What kind of debts do you have? | | | arily consumer debts a personal, family, or | | fined in 11 U.S.C. § 101(8) as "incurred by an | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | ■ Yes. Go to line 17. | | | | | |
| | | | | | <i>Properties are debts are debts</i> Business debts are debts are debts are debts. | s that you incurred to obtain siness or investment. | | |
| | | | ☐ No. Go to line 16c. ☐ Yes. Go to line 17. | | | | | |
| | | | | | | | | |
| | | 16c. | State the type of debts | s you owe that are not | consumer debts or busine | ess debts | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under C | Chapter 7. Go to line 18 | 3. | | | |
| | Do you estimate that after any exempt property is excluded and | | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | | |
| | administrative expenses | | ■ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | □ Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 | | □ 1,000 □ 5001 | | ☐ 25,001-50,000 ☐ 50,001-100,000 | | |
| | □ 100-199 □ 200-999 | | | □ 10,00 | 01-25,000 | ☐ More than100,000 | | |
| 19. | How much do you estimate your assets to be worth? | \$100,0 | 0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million | □ \$10,0 □ \$50,0 | 00,001 - \$10 million 000,001 - \$50 million 000,001 - \$100 million ,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | | |
| | | — \$500,0 | | | ,, | | | |
| 20. | How much do you estimate your liabilities to be? | \$100,0 | 0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million | □ \$10,0 □ \$50,0 | 00,001 - \$10 million 000,001 - \$50 million 000,001 - \$100 million 1,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | |
| Pari | 7: Sign Below | | | | | | | |
| For | you | I have exa | mined this petition, an | ıd I declare under pen | alty of perjury that the infor | rmation provided is true and correct. | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | |
| | | | | | e to pay someone who is ned by 11 U.S.C. § 342(b). | ot an attorney to help me fill out this | | |
| | | I request r | elief in accordance wit | th the chapter of title 1 | 1, United States Code, spe | ecified in this petition. | | |
| | | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | |
| | | John C. | C. Sullivan Sullivan | | Signature of Debte | or 2 | | |
| | | | of Debtor 1 | | J | | | |
| | | Executed | September 7, MM / DD / YYYY | | Executed on Min | M / DD / YYYY | | |

Debtor 1 John C. Sullivan

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Verner | R. Rudder, Jr. | Date | September 7, 2018 | |
|-----------------|----------------------------|---------------|---------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| Verner R. I | Rudder, Jr. | | | |
| Verner R. I | Rudder Jr. Attorney at Law | | | |
| 183 W. Au | rora Rd. OH 44067-2056 | | | |
| | City, State & ZIP Code | | | |
| Contact phone | 330-467-3002 | Email address | vrr@rudderlegal.com | |
| 0003442 O | Н | | | |
| Bar number & St | ate | | | |

| | | | | | | | 9/07/18 1:18PM |
|------------|--|---|---|---|---|--------------|------------------------|
| | | ation to identify your | case: | | | | |
| Deb | otor 1 | John C. Sullivan First Name | Middle Name | Last Name | | | |
| 1 - | otor 2 use if, filing) | First Name | Middle Name | Last Name | | | |
| | - | kruptcy Court for the: | NORTHERN DISTRIC | | | | |
| | | Kruptey Court for the. | NORTHERN BIOTRIC | 77 01 01110 | | | |
| (if kn | | | | | | ☐ Check | if this is an |
| | | | | | | amen | ded filing |
| ~ (| . | 1000 | | | | | |
| | | m 106Sum | and Liabilities a | ınd Certain Statisti | ical Information | | 12/15 |
| Be a | s complete ar rmation. Fill or r original form | nd accurate as possib ut all of your schedule | le. If two married peopes first; then complete | le are filing together, both a the information on this forn ck the box at the top of this | are equally responsible fon. If you are filing amend | or supplyin | g correct |
| ı aı | Julillia | nize rour Assets | | | | Varina | |
| | | | | | | Your a | f what you own |
| 1. | | B: Property (Official Fo 55, Total real estate, fo | | | | \$ | 258,230.00 |
| | 1b. Copy line | 62, Total personal prop | perty, from Schedule A/E | 3 | | \$ | 38,345.54 |
| | 1c. Copy line | 63, Total of all property | y on Schedule A/B | | | \$ | 296,575.54 |
| Part | t 2: Summa | rize Your Liabilities | | | | | |
| | | | | | | | abilities t you owe |
| 2. | | | laims Secured by Proper nn A, Amount of claim, a | ty (Official Form 106D) It the bottom of the last page | of Part 1 of Schedule D | \$ | 282,444.00 |
| 3. | | | Unsecured Claims (Offic 1 (priority unsecured clai | ial Form 106E/F) ms) from line 6e of <i>Schedule</i> | E/F | \$ | 0.00 |
| | 3b. Copy the | total claims from Part | 2 (nonpriority unsecured | claims) from line 6j of Sched | ule E/F | \$ | 25,703.41 |
| | | | | | Your total liabilities | \$ | 308,147.41 |
| Part | t 3: Summa | rize Your Income and | Expenses | | | | |
| 4. | | our Income (Official Fo | | le I | | \$ | 3,639.63 |
| 5. | | our Expenses (Official onthly expenses from li | | | | \$ | 4,123.57 |
| Part | t 4: Answer | These Questions for | Administrative and Sta | atistical Records | | | |
| 6. | | | er Chapters 7, 11, or 13 on this part of the form. | ? Check this box and submit the | is form to the court with yo | ur other sch | nedules. |
| 7. | ■ Yes What kind of | debt do you have? | | | | | |
| | Your de | bts are primarily cons | sumer debts. Consume | r debts are those "incurred by | an individual primarily for | a personal, | family, or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

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Best Case Bankruptcy

Debtor 1 John C. Sullivan

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,459.63

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | | | | | | _ | | 9/07/18 1:18P |
|---------|-----------------|-----------------------------------|------------------|------------------------------------|---|---|--|------------------------------------|---|
| Fill in | this infor | mation to identify you | r case and th | is filin | g: | | | | |
| Debto | or 1 | John C. Sullivar | 1 | | | | | | |
| | | First Name | | Name | Last Name | | | | |
| Debto | | | | | | | | | |
| (Spous | e, if filing) | First Name | Middle | Name | Last Name | | | | |
| United | d States Ba | ankruptcy Court for the: | NORTHER | N DIST | RICT OF OHIO | | | | |
| _ | | | | | | | | _ | |
| Case | number _ | | | | | | | | Check if this is an amended filing |
| | | | | | | | 1 | | amonaca ming |
| Offi | cial Fo | rm 106A/B | | | | | | | |
| - | | e A/B: Pro | oortv | | | | | | 40/45 |
| | | | | | t only once. If an asset fits in more than o | | | | 12/15 |
| □ N ■ Y | No. Go to Par | rt 2. | le interest in a | | dence, building, land, or similar property? | | | | |
| _ | 9240 Milfo | | | | Single-family home | | | | or exemptions. Put |
| • | Street address, | if available, or other descriptio | n | | Duplex or multi-unit building | the amount of any secured claims of Creditors Who Have Claims Secure | | | |
| | | | | | Condominium or cooperative | | | | |
| | | | | П | Manufactured or mobile home | | | | |
| | Northfield | I OH 44 | 067-0000 | _ | | Current va | alue of the | | rrent value of the rtion you own? |
| _ | City | State | ZIP Code | | - | · . | 20,630.00 | poi | \$120,630.00 |
| · | J., | State | 2 0000 | | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | O ther | | | | wnership interest by the entireties, o |
| | | | | Who | has an interest in the property? Check one | a life esta | te), if known. | | |
| | | | | | Debtor 1 only | Full sub | ject to Hon | ne E | quity Loan |
| ; | Summit | | | | Debtor 2 only | | | | |
| (| County | | | | Debtor 1 and Debtor 2 only | Chan | le if this is some | | iter manageter |
| | | | | | At least one of the debtors and another | | k if this is com structions) | muni | ity property |
| | | | | | er information you wish to add about this interty identification number: | tem, such as l | ocal | | |
| | | | | And 6 of reco and Driv | uated in the Village of Northfield, I known as being Sublot No. 219 I part of Original Northfield Town orded plat in volume 57 of Maps, I being a parcel of land 60 feet fro we and extending back of equal we t, be the same more or less, but s | in Northfiel ship Lot No Page 14 of ont on the V vidth 175 fe | d Square S b. 32, as sho Summit Co Vesterly line et deep, as | ubd own unty e of appe | ivision No. by the y Records Milford ears by said |

Official Form 106A/B Schedule A/B: Property

Official Form 106A/B

Schedule A/B: Property

| Deb | otor 1 J e | ohn C. Sullivan | | Case number (if known) | |
|-------------|-------------------------|---|--|--|---|
| | | | interest in any vehicles, whether they are regis report it on Schedule G: Executory Contracts and | | vehicles you own that |
| 3. C | ars, vans, | trucks, tractors, sport utility ve | hicles, motorcycles | | |
| | l No | | | | |
| _ | Yes | | | | |
| _ | 163 | | | | |
| 3.1 | | Pontiac Grand Prix | Who has an interest in the property? Check one | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: |
| | Model: | 2006 | ■ Debtor 1 only | Creditors Who Have Ci | laims Secured by Property. |
| | Year: | 2006 nate mileage: 130000 | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | ormation: | ☐ At least one of the debtors and another | chare property: | portion you own. |
| | | ndition-Kelley Blue Book | At least one of the debtors and another | | |
| | Private Location | Party Value on: 9240 Milford Dr., eld OH 44067 | ☐ Check if this is community property (see instructions) | \$3,785.00 | \$3,785.00 |
| 3.2 | 2 Make: Model: | Hyundai Elantra | Who has an interest in the property? Check one Debtor 1 only | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: laims Secured by Property. |
| | Year: | 2015 | Debtor 2 only | Current value of the | Current value of the |
| | Approxin | nate mileage: 24796 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | ormation: | At least one of the debtors and another | | |
| | L. Rom | on appraisel by Ronald an on: 9240 Milford Dr., | ☐ Check if this is community property (see instructions) | \$11,250.00 | \$11,250.00 |
| | latorcraft | aircraft motor homes ATVs ar | nd other recreational vehicles, other vehicles, a | nd accessories | |
| | | | atercraft, fishing vessels, snowmobiles, motorcycle | | |
| | | | | | |
| | No | | | | |
| | l Yes | | | | |
| | | | | | |
| | | | | | |
| | | llar value of the portion you ow have attached for Part 2. Write | n for all of your entries from Part 2, including a | any entries for | \$15,035.00 |
| 4 | ages you | nave attached for 1 art 2. Write | triat number nere | | <u> </u> |
| Pari | 3: Descri | oe Your Personal and Household It | ems | | |
| | | | terest in any of the following items? | | Current value of the |
| | • | , , , | , , | | portion you own? |
| | | | | | Do not deduct secured claims or exemptions. |
| | | goods and furnishings | | | ciaims of exemptions. |
| | _ ' | Major appliances, furniture, linens | , china, kitchenware | | |
| | □ No | | | | |
| | Yes. De | scribe | | | |
| | | Household goo | ds and furnishings, kitchen appliances | | |
| | | | Milford Dr., Northfield OH 44067 | | \$3,500.00 |
| | | | , | | |
| , - | laatuonis - | | | | |
| | lectronics Examples: | | eo, stereo, and digital equipment; computers, print | ers, scanners: music collec | etions; electronic devices |
| - | • | including cell phones, cameras, n | | , 22, 23, 25, 25, 25, 25, 25, 25, 25, 25, 25, 25 | , |
| | □ No | | | | |
| | Yes. De | scribe | | | |
| | | | | | |

Official Form 106A/B Schedule A/B: Property page 3

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,750.00

page 4

☐ Yes. Give specific information.....

■ No

Official Form 106A/B

Schedule A/B: Property

| Part 4: Describe Your Finan Do you own or have any l | o you own or have any legal or equitable interest in any of the following? | | | | | | | | | | portion you own? | | portion you own? Do not deduct secured |
|---|--|---|--|--------------------------|--|--|--|--|--|--|------------------|--|--|
| □ No | • | our wallet, in your home, in | n a safe deposit box, and on hand when you file your petition | | | | | | | | | | |
| | | | Cash Location: 9240 Milford Dr., Northfield OH 44067 | \$25.00 | | | | | | | | | |
| institutions. □ No | | | certificates of deposit; shares in credit unions, brokerage hou the same institution, list each. Institution name: | ses, and other similar | | | | | | | | | |
| ■ Yes | 17.1. | Personal Checking | Huntington National Bank Location: 9240 Milford Dr., Northfield OH 44067 | \$224.00 | | | | | | | | | |
| | 17.2. | Savings | Hunting National Bank Location: 9240 Milford Dr., Northfield OH 44067 | \$37.12 | | | | | | | | | |
| | 17.3. | Business Checking | Huntington National Bank Location: 9240 Milford Dr., Northfield OH 44067 | \$17.38 | | | | | | | | | |
| 18. Bonds, mutual funds, Examples: Bond funds ■ No □ Yes | , investme | | ge firms, money market accounts | | | | | | | | | | |
| 19. Non-publicly traded so joint venture | tock and i | interests in incorporated | d and unincorporated businesses, including an interest in | an LLC, partnership, and | | | | | | | | | |
| ■ No □ Yes. Give specific inf | | about themne of entity: | % of ownership: | | | | | | | | | | |
| Negotiable instruments Non-negotiable instrum ■ No | s include p <i>nent</i> s are t | ersonal checks, cashiers' hose you cannot transfer | e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them. | | | | | | | | | | |
| ☐ Yes. Give specific info | | about them uer name: | | | | | | | | | | | |
| 21. Retirement or pensior Examples: Interests in □ No | | | , thrift savings accounts, or other pension or profit-sharing plan | ns | | | | | | | | | |
| Yes. List each account | | ely. of account: | Institution name: | | | | | | | | | | |
| | 401(| κ) | Fidelity 401(K) Location: 9240 Milford Dr., Northfield OH 44067 | \$18,257.04 | | | | | | | | | |

Official Form 106A/B Schedule A/B: Property

| De | ebtor 1 | John C. S | Bullivan | | | Case number | (if known) | |
|-----|------------------|---|---|---|------------------------------|---------------------------|-------------------|---|
| | | | | | | | | |
| | Your sh | nare of all un | | ave made so that you may repaid rent, public utilities | | | | or others |
| | | | | Instituti | on name or individ | dual: | | |
| 23. | _ | es (A contra | ct for a periodic payn | nent of money to you, eithe | er for life or for a n | umber of years) | | |
| | ■ No □ Yes | | Issuer name and de | escription. | | | | |
| | | | ation IRA, in an acc 1), 529A(b), and 529 | count in a qualified ABLE (b)(1). | program, or und | der a qualified state to | uition prograr | n. |
| | ☐ Yes | | Institution name an | d description. Separately f | ile the records of a | any interests.11 U.S.C. | . § 521(c): | |
| 25. | Trusts, ■ No | equitable o | future interests in | property (other than any | thing listed in lin | ne 1), and rights or po | wers exercisa | able for your benefit |
| | ☐ Yes. | Give specific | information about th | em | | | | |
| 26. | | | | secrets, and other intellecties, proceeds from royalti | | agreements | | |
| | | Give specific | information about th | em | | | | |
| 27. | | | es, and other general permits, exclusive lice | al intangibles enses, cooperative associ | ation holdings, liq | uor licenses, professio | nal licenses | |
| | | Give specific | information about th | em | | | | |
| М | oney or p | property ow | ed to you? | | | | | Current value of the portion you own? |
| | | | | | | | | Do not deduct secured claims or exemptions. |
| 28. | _ | unds owed t | o you | | | | | |
| | ■ No □ Yes. 0 | Give specific | information about the | em, including whether you | already filed the r | eturns and the tax yea | .rs | |
| | ■ No | les: Past due | · | y, spousal support, child s | upport, maintenar | nce, divorce settlement | i, property settl | ement |
| | ⊔ Yes. (| Give specific | information | | | | | |
| | Examp | <i>les:</i> Unpaid v | | rance payments, disability ade to someone else | benefits, sick pay | , vacation pay, worker | rs' compensation | on, Social Security |
| | ■ No □ Yes. | Give specific | information | | | | | |
| | Examp | ts in insuran les: Health, c | | ance; health savings accou | unt (HSA); credit, l | homeowner's, or rente | r's insurance | |
| | ■ No □ Yes N | Name the ins | urance company of e | each policy and list its valu | e | | | |
| | — 103.1 | varie tre me | Company n | | | Beneficiary: | | Surrender or refund value: |
| | If you a someor | erest in propers the benefine has died. | perty that is due you ciary of a living trust, | u from someone who has expect proceeds from a li | s died fe insurance polic | y, or are currently entit | led to receive p | property because |
| | ■ No □ Yes | Give specific | information | | | | | |

Official Form 106A/B Schedule A/B: Property page 6

| De | btor 1 | John C. Sullivan | | Case number (if known) | |
|-----|-----------------------|---|------------------------------|-----------------------------|------------------------|
| ı | <i>Exam</i> µ ■ No | against third parties, whether or not you have filed a la bles: Accidents, employment disputes, insurance claims, or | | and for payment | |
| l | ☐ Yes. | Describe each claim | | | |
| ı | No | contingent and unliquidated claims of every nature, incl Describe each claim | uding counterclaims o | of the debtor and rights to | set off claims |
| | | | | | |
| | Any fir ■ No | nancial assets you did not already list | | | |
| | | Give specific information | | | |
| 36. | | the dollar value of all of your entries from Part 4, includi art 4. Write that number here | | | \$18,560.54 |
| Par | t 5: De | scribe Any Business-Related Property You Own or Have an Inte | erest In. List any real esta | te in Part 1. | |
| 37. | Do you | own or have any legal or equitable interest in any business-rela | ted property? | | |
| | No. Go | to Part 6. | | | |
| | Yes. C | Go to line 38. | | | |
| | Do you No. | scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1. I own or have any legal or equitable interest in any farm Go to Part 7. Go to line 47. | | | |
| | □ 163 | . 30 to line 47. | | | |
| Par | t 7: | Describe All Property You Own or Have an Interest in That Yo | ou Did Not List Above | | |
| 53. | | have other property of any kind you did not already listoles: Season tickets, country club membership | t? | | |
| | ■ No | Give specific information | | | |
| | □ 1es. | Give specific information | | _ | |
| 54. | Add t | the dollar value of all of your entries from Part 7. Write the | hat number here | | \$0.00 |
| Par | t 8: | List the Totals of Each Part of this Form | | | |
| 55. | | 1: Total real estate, line 2 | | | \$259 220 00 |
| 56. | | 2: Total vehicles, line 5 | \$15,035.00 | | \$258,230.00 |
| 57. | | 3: Total personal and household items, line 15 | \$4,750.00 | | |
| 58. | | 4: Total financial assets, line 36 | \$18,560.54 | | |
| 59. | | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6 | 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | | 7: Total other property not listed, line 54 | + \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$38,345.54 | Copy personal property to | tal \$38,345.54 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$296,575.54 |

Official Form 106A/B Schedule A/B: Property page 7

| Debtor 1 | John C. Sullivan | | | |
|--------------------|--------------------------|-------------------|-----------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| if known) | | | | ☐ Check if this is an amended filing |

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Itt 1: Identify the Property You Claim as E | xempt | | | |
|----|--|--------------------------------------|---------|---|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | |
| | You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 l | J.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exc | empt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | 9240 Milford Dr. Northfield, OH 44067 Summit County | \$120,630.00 | | \$21,443.00 | Ohio Rev. Code Ann. § 2329.66(A)(1) |
| | Situated in the Village of Northfield, county of Summit and State of Ohio, And known as being Sublot No. 219 in Northfield Square Subdivision No. 6 of part of Original Northfield Township Lot No. 32, as Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 2323.00(A)(1) |
| | 2015 Hyundai Elantra 24796 miles | \$11,250.00 | | \$3,775.00 | Ohio Rev. Code Ann. § |
| | Based on appraisel by Ronald L. Roman Location: 9240 Milford Dr., Northfield OH 44067 Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | 2329.66(A)(2) |
| | 2015 Hyundai Elantra 24796 miles | \$11,250.00 | | \$1,250.00 | Ohio Rev. Code Ann. § |
| | Based on appraisel by Ronald L. Roman Location: 9240 Milford Dr., Northfield OH 44067 | | | 100% of fair market value, up to any applicable statutory limit | 2329.66(A)(18) |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Line from Schedule A/B: 3.2

Debtor 1 John C. Sullivan Case number (if known) Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Current value of the Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Household goods and furnishings, Ohio Rev. Code Ann. § \$3,500.00 \$3.500.00 kitchen appliances 2329.66(A)(4)(a) Location: 9240 Milford Dr., Northfield 100% of fair market value, up to OH 44067 any applicable statutory limit Line from Schedule A/B: 6.1 Ohio Rev. Code Ann. § Dell computer (15 years old) \$500.00 \$500.00 Aces laptop computer 2329.66(A)(4)(a) 27" Sony television 100% of fair market value, up to 20" Sony television any applicable statutory limit Location: 9240 Milford Dr., Northfield **OH 44067** Line from Schedule A/B: 7.1 .25 calibur handgun Ohio Rev. Code Ann. § \$200.00 \$200.00 Location: 9240 Milford Dr., Northfield 2329.66(A)(4)(a) **OH 44067** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 10.1 Everyday wearing apparel, coats, Ohio Rev. Code Ann. § \$300.00 \$300.00 shoes 2329.66(A)(4)(a) Location: 9240 Milford Dr., Northfield 100% of fair market value, up to OH 44067 any applicable statutory limit Line from Schedule A/B: 11.1 Ohio Rev. Code Ann. § 2 rings \$100.00 \$100.00 Location: 9240 Milford Dr., Northfield 2329.66(A)(4)(b) **OH 44067** 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit Ohio Rev. Code Ann. § Cash \$25.00 \$25.00 2329.66(A)(3) Location: 9240 Milford Dr., Northfield **OH 44067** 100% of fair market value, up to Line from Schedule A/B: 16.1 any applicable statutory limit **Personal Checking: Huntington** Ohio Rev. Code Ann. § \$224.00 \$224.00 **National Bank** 2329.66(A)(3) Location: 9240 Milford Dr., Northfield 100% of fair market value, up to **OH 44067** any applicable statutory limit Line from Schedule A/B: 17.1 Ohio Rev. Code Ann. § Savings: Hunting National Bank \$37.12 \$37.12 Location: 9240 Milford Dr., Northfield 2329.66(A)(3) П **OH 44067** 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit 401(K): Fidelity 401(K) Ohio Rev. Code Ann. § \$18,257.04 \$18,257.04 Location: 9240 Milford Dr., Northfield 2329.66(A)(10)(b) **OH 44067** 100% of fair market value, up to Line from Schedule A/B: 21.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

| | | | | | 9/01/10 1.1011 |
|--------------------------------------|--------------------------|---|--|----------------------|--------------------|
| Fill in this inform | nation to identify you | case: | | | |
| Debtor 1 | John C. Sullivan | | | | |
| 200101 | First Name | Middle Name Last Name | | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF OHIO | | | |
| 0 | | | | | |
| Case number | | | | ☐ Check | if this is an |
| , | | | | _ | led filing |
| | | | | | |
| Official Form | <u> 106D</u> | | | | |
| Schedule | D: Creditors | Who Have Claims Secur | ed by Property | • | 12/15 |
| | | | <u> </u> | | |
| | | two married people are filing together, both are ut, number the entries, and attach it to this form | | | |
| number (if known). | | , | , | | |
| 1. Do any creditors | have claims secured by | your property? | | | |
| □ No. Check | this box and submit th | is form to the court with your other schedules | . You have nothing else to | report on this form. | |
| Yes. Fill in | all of the information b | elow. | | | |
| | I Secured Claims | | | | |
| <u> </u> | | | Column A | Column B | Column C |
| | | ore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A | | Value of collateral | Unsecured |
| | | al order according to the creditor's name. | Do not deduct the value of collateral. | that supports this | portion |
| 2.1 Ditech Fin | ancial LLC | Describe the property that secures the claim: | \$87,344.00 | \$74,500.00 | If any \$12,844.00 |
| Creditor's Name | | 876 Lincoln Blvd. Bedford, OH | | 41 3,000 | |
| | | 44146 Cuyahoga County | | | |
| | | Situated in the City of Bedford, | | | |
| | | County of Cuyahoga and State of | | | |
| | | Ohio, and known as being Sublot 64 in the Yorkshire Heights subdivivion | | | |
| | | of part of Original Bedford | | | |
| 2100 F FI | liot Road, Bldg. | Township Lot No. 36 a | | | |
| 94 | not read, blug. | As of the date you file, the claim is: Check all that apply. | _ | | |
| Tempe, Az | Z 85284 | Contingent | | | |
| Number, Street, | City, State & Zip Code | ☐ Unliquidated | | | |
| | | ☐ Disputed | | | |
| Who owes the de | bt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | An agreement you made (such as mortgage or | secured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and De | | Statutory lien (such as tax lien, mechanic's lien |) | | |
| _ | ne debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this cla community del | | Other (including a right to offset) | | | |
| | | | | | |
| | July 31, | Last 4 digits of account number 214 | 2 | | |
| Date debt was incu | irred <u>2006</u> | Last 4 digits of account number 214 | · <u>·</u> | | |
| | | | *** | 400 400 00 | 400 100 00 |
| 2.2 Ditech Fin Creditor's Name | ancial LLC | Describe the property that secures the claim: | \$92,236.00 | \$63,100.00 | \$29,136.00 |
| Creditor's Name | | 13700 Maple Leaf Drive Garfield Hts., OH 44125 Cuyahoga County | | | |
| | | Situated in the City of Garfield | | | |
| | | Heights, County of Cuyahoga and | | | |
| | | State of Ohio, and known as being | | | |
| | | Sublot 321, in the York subdivision | | | |
| | | No. 2, being a Resubdivision of block B, | | | |
| 2100 E. El | | As of the date you file, the claim is: Check all that | _ | | |
| Building 9 Tempe, Az | | apply. | | | |
| | | Contingent | | | |
| Number, Street, | City, State & Zip Code | ☐ Unliquidated | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

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Best Case Bankruptcy

| Debtor 1 | John C. Sullivan First Name | Middle Name Last Name | Case | number (if know) | | |
|-----------------------------|---|--|-------------------------|------------------|--------------|--------|
| Who owe | s the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor | . , | An agreement you made (such as mortgo car loan) | age or secured | | | |
| ☐ Debtor ☐ At least ☐ Check | 1 and Debtor 2 only t one of the debtors and a if this claim relates to a funity debt | ☐ Statutory lien (such as tax lien, mechanic | c's lien) | | | |
| Date debt | was incurred 8/01/20 | Last 4 digits of account number | xxxx | | | |
| | h Third Bank | Describe the property that secures the cl | aim: | \$99,187.00 | \$120,630.00 | \$0.00 |
| 505 | 50 Kingsley Dr. acinnati, OH 45227 | 9240 Milford Dr. Northfield, OH 44067 Summit County Situated in the Village of Northfie county of Summit and State of County of Summit and Summit a | Ohio, 219 1 Id | | | |
| Numb | ber, Street, City, State & Zip Cost | | | | | |
| ☐ At least | • | An agreement you made (such as mortge car loan)Statutory lien (such as tax lien, mechanic | | | | |
| | was incurred 11/21/2 | 2003 Last 4 digits of account number | 5368 | | | |
| 2.4 Hur | ntington National | Describe the property that secures the cl | aim: | \$3,677.00 | \$11,250.00 | \$0.00 |
| PO Col Numb | Box 1558 lumbus, OH 43216 ber, Street, City, State & Zip Co | 2015 Hyundai Elantra 24796 mile Based on appraisel by Ronald L Roman Location: 9240 Milford Dr., Northfield OH 44067 As of the date you file, the claim is: Check apply. Contingent | es · | | | |
| ■ Debtor | • | An agreement you made (such as mortge car loan) | age or secured | | | |
| ☐ Debtor ☐ At least ☐ Check | 1 and Debtor 2 only t one of the debtors and ar if this claim relates to a nunity debt | □ Statutory lien (such as tax lien, mechanic nother □ Judgment lien from a lawsuit □ Other (including a right to offset) | c's lien) | | | |
| Date debt | was incurred 7/08/20 | 215 Last 4 digits of account number | 5620 | | | |
| Add the | dollar value of your entr | ies in Column A on this page. Write that number h | ere: | \$282,444 | .00 | |

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D

page 2 of 3

| Depto | or i John C. Suli | iivan | | Case number (if know) |
|------------------|---|------------------------------|-----------------------------------|--|
| | First Name | Middle Name | Last Name | |
| Writ | e that number here: | your form, add the dollar va | . 0 | \$282,444.00 |
| Part 2 | List Others to I | Be Notified for a Debt Th | nat You Already Listed | |
| trying than o | to collect from you fone creditor for any o | or a debt you owe to some | one else, list the creditor in Pa | of that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more editors here. If you do not have additional persons to be notified for any |
| | Name, Number, Stree Ditech Financia | et, City, State & Zip Code | | On which line in Part 1 did you enter the creditor? 2.1 |
| | c/o David J. Der Cooke Demers, | LLC | | Last 4 digits of account number 2142 |
| | 260 Market St., New Albany, Oh | | | |
| | Name, Number, Stree | et, City, State & Zip Code | | On which line in Part 1 did you enter the creditor? 2.2 |
| | Ditech Financia | | | On which line in Part 1 did you enter the creditor? |
| | P.O. Box 6172 | 57709-6172 | | Last 4 digits of account number |

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

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| | | | | | | | | 9/07/18 1:18PM |
|--------------|----------------------------|-----------------------------|--------------------|------------------------|---------------------|---|----------------|---------------------------------|
| Fill in th | is informati | on to identify your c | ase: | | | | | |
| Debtor 1 | | John C. Sullivan | | | | | | |
| | | First Name | Middle Na | ame | Last Name | | | |
| Debtor 2 | _ | | | | | | | |
| (Spouse if, | filing) | First Name | Middle Na | ame | Last Name | | | |
| United S | tates Bankru | uptcy Court for the: | NORTHERN | N DISTRICT OF C | OHIO | | | |
| Case nu | mber | | | | | | | |
| (if known) | | | | _ | | | | Check if this is an |
| | | | | | | | | amended filing |
| Officia | l Form 1 | OSE/E | | | | | | |
| | l Form 1 | ੁਰ⊏/⊏ : Creditors W | ha Hava | Uncopura | d Claima | | | 12/15 |
| | | | | | | Part 2 for araditors with NON | IDDIODITY A | claims. List the other party to |
| any execu | tory contract | s or unexpired leases | that could resu | ılt in a claim. Also | list executory | contracts on Schedule A/B: F | Property (Of | ficial Form 106A/B) and on |
| | | | | | | any creditors with partially s the Part you need, fill it out, | | |
| left. Attacl | h the Continu | ation Page to this page | | | | do not file that Part. On the t | | |
| | case number | • | | | | | | |
| Part 1: | | Your PRIORITY Un | | | | | | |
| _ | • | | a Ciaillis agaills | st you! | | | | |
| | o. Go to Part 2 | 2. | | | | | | |
| ☐ Ye | _ | Your NONPRIORIT | V Uneocurod | Claime | | | | |
| | | | | | | | | |
| _ | - | nave nonpriority unsec | _ | | | | | |
| ⊔ No | o. You have n | othing to report in this pa | art. Submit this f | form to the court wit | th your other sche | edules. | | |
| ■ Ye | es. | | | | | | | |
| 4. List a | all of your no | npriority unsecured cla | nims in the alpl | habetical order of | the creditor who | holds each claim. If a credit | or has more | than one nonpriority |
| | | | | | | type of claim it is. Do not list cla three nonpriority unsecured c | | |
| Part 2 | | , | | , | | ,, | | |
| | | | | | | | | Total claim |
| | Fifth Third | | | Last 4 digits of ac | count number | 5856 | | \$12,383.00 |
| | Nonpriority Cre 5050 Kings | | | When was the del | ht incurred? | 1/24/2006 through 6/ | 12/2018 | |
| | | OH 45227 | | Wildir Was the asi | or mountou. | 1/2-1/2000 till oagil o/ | 12/2010 | |
| | | City State ZIp Code | | As of the date you | u file, the claim | is: Check all that apply | | |
| _ | | the debt? Check one. | | _ | | | | |
| _ | Debtor 1 or | • | | Contingent | | | | |
| _ | Debtor 2 or | - | | ☐ Unliquidated | | | | |
| | | nd Debtor 2 only | | Disputed | DITY | 1.1.1 | | |
| _ | | e of the debtors and ano | | Type of NONPRIO | KIIY unsecure | d claim: | | |
| | L Check if th debt | nis claim is for a comn | nunity | _ | | | | -1 |
| | | ubject to offset? | | report as priority cla | | aration agreement or divorce th | iat you did no | Σť |
| ı | No | | | ☐ Debts to pension | on or profit-sharin | ng plans, and other similar debi | ts | |
| | | | | | Credit Card | | | |
| | | | | | Consumer | goods | | |
| ı | □ Yes | | | Other Specify | Living expe | ense d finance charges | | |
| | – 162 | | | _ Outer. Openly | interest and | u imance charges | | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 3

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35312

| Debtor | John C. Sullivan | | _ | Case number (if know) | |
|--------|--|--|--|--|------------|
| 4.2 | Fifth Third Bank Nonpriority Creditor's Name | Last 4 digits of acc | ount number | 3196 | \$243.41 |
| | 5050 Kingsley Dr. | When was the debt | incurred? | through 2/28/18 | |
| | Cincinnati, OH 45263 Number Street City State Zlp Code | As of the date you | file. the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , , , , , , | , | or chook an unat apply | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIOR | ITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising report as priority claim | | ration agreement or divorce that you did not | |
| | ■ No | | | g plans, and other similar debts | |
| | _ 110 | • | Credit card | | |
| | _ | _ | consumer | goods | |
| | Yes | Other. Specify | Interest and | d finace charges | |
| 4.3 | Huntington National Bank Nonpriority Creditor's Name | Last 4 digits of acc | ount number | 4302 | \$3,170.00 |
| | PO Box 1558 | When was the debt | incurred? | 5/07/2015 through 6/30/18 | |
| | Columbus, OH 43216 | _ | | | |
| | Number Street City State Zlp Code | As of the date you | file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIOR | UTV | d alaim. | |
| | At least one of the debtors and another | Student loans | arr unsecure | a ciaim: | |
| | ☐ Check if this claim is for a community debt | | ng out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority clai | | a plane, and other similar debte | |
| | ■ No | | | g plans, and other similar debts | |
| | ☐ Yes | _ | Credit Card Consumer Living expe Interest and | good | |
| 4.4 | Kohls/CapOne Nonpriority Creditor's Name | Last 4 digits of acc | ount number | xxxx | \$177.00 |
| | PO Box 3115 | When was the debt | incurred? | 1/24/2000 through 3/31/2018 | |
| | Milwaukee, WI 53201 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you | file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIOR | ITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising report as priority clai | | ration agreement or divorce that you did not | |
| | ■ No | | | g plans, and other similar debts | |
| | | • | Credit Card | | |
| | _ | _ | Consumer | goods | |
| | ☐ Yes | Other. Specify | Interest and | d finance charges | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 3

| Synchrony Bank/Care Credit | Last 4 digits of acco | ount number | 9594 | \$9,730 |
|--|--|--|--|---------|
| Nonpriority Creditor's Name P.O. Box 965036 | When was the debt | incurred? | 11/20/2007 through 12/31/2017 | |
| Orlando, FL 32896 Number Street City State Zlp Code | As of the date you f | ile, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIOR | TY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising report as priority claim | | ration agreement or divorce that you did not | |
| No | ☐ Debts to pension | or profit-sharin | g plans, and other similar debts | |
| Пу | _ (| Credit Card Consumer (Living expe | goods nses | |
| ☐ Yes | Other. Specify | nterest and | I finance charges | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Synchrony Bank PO Box 960061 Orlando, FL 32896-0061 On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

 $\hfill \square$ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 25,703.41 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 25,703.41 |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 3

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-----------|-------------|
| Debtor 1 | John C. Sullivan | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | - |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| | , | | 3. | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Best Case Bankruptcy

| Fill in this | | | | 9/07/18 1 |
|--------------------------------------|---|---|---|--|
| riii iii uiis | s information to identify your | case: | | |
| Debtor 1 | John C. Sullivan | | | |
| 20010. | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, fil | ing) First Name | Middle Name | Last Name | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| 0 | sh a a | | | |
| Case num (if known) | nber | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Officia | ıl Form 106H | | | |
| Sched | dule H: Your Cod | ebtors | | 12/15 |
| | | | | 12/11 |
| our name | e and case number (if known) | . Answer every question | i. | this page. On the top of any Additional Pages, write |
| 1. Do | you have any codebtors? (If | you are filing a joint case, | do not list either spouse a | as a codebtor. |
| ■ No | | | | |
| □Ye | S | | | |
| 0.140 | all the all the second | . 15 1 to | | • (0 |
| | tnin tne iast 8 years, nave yot na, California, Idaho, Louisiana | | | ? (Community property states and territories include nation, and Wisconsin.) |
| 7 11201 | na, camorna, radno, codiciana | , rrovada, rrow moxico, r c | iorto raco, roxac, rracim | gion, and Widooniam) |
| ■ No | . Go to line 3. | | | |
| | D: 1 | | | |
| ⊔ Ye | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | |
| ⊔ Ye | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | |
| 3. In Co in line Form | lumn 1, list all of your codeb e 2 again as a codebtor only | ors. Do not include your f that person is a guaran | spouse as a codebtor i | f your spouse is filing with you. List the person sho ure you have listed the creditor on Schedule D (Offi G). Use Schedule D, Schedule E/F, or Schedule G to |
| 3. In Co in line Form | lumn 1, list all of your codebte 2 again as a codebtor only 106D), Schedule E/F (Officia column 2. | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Offic). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del |
| 3. In Co in line Form | lumn 1, list all of your codeb e 2 again as a codebtor only 106D), Schedule E/F (Officia column 2. | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Office). Use Schedule D, Schedule E/F, or Schedule G to |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only 106D), Schedule E/F (Officia column 2. | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Offic). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del |
| 3. In Co in line Form | lumn 1, list all of your codebte 2 again as a codebtor only 106D), Schedule E/F (Officia column 2. | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor i | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor interior or cosigner. Make solule G (Official Form 106 | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor interior or cosigner. Make solule G (Official Form 106 | Column 2: The creditor to whom you owe the del Check all schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line |
| 3. In Co in line Form out C | lumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor interior or cosigner. Make solule G (Official Form 106 | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line |
| 3. In Co in line Form out C | Ilumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Ziname Name Street City | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor intor or cosigner. Make solule G (Official Form 106 | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line |
| 3. In Co in line Form out C | Ilumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Ziname Number Street City Name | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor intor or cosigner. Make solule G (Official Form 106 | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line |
| 3. In Co in line Form out C | Ilumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2. Column 1: Your codebtor Name, Number, Street, City, State and Ziname Name Street City | tors. Do not include your if that person is a guaran I Form 106E/F), or Sched | spouse as a codebtor intor or cosigner. Make solule G (Official Form 106 | ure you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line |

| Eill | in this information to identify your c | 200 | | | | | | | |
|--------------------|--|----------------------------|--|-------------|------------------|------------------------------------|---------------------------|-------------------------------|-------------------|
| | otor 1 John C. Sull | | | | | | | | |
| Der | John C. Sui | livan | | | _ | | | | |
| 1 | otor 2 ouse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF OHIO | | | | | | |
| | se number | | - | | | | ded filing nent showii | ng postpetitior | |
| 0 | fficial Form 106l | | | | | MM / DD | YYYY | J | |
| S | chedule I: Your Inc | ome | | | | WINT DD | | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not fili | ng jointly, and your ith you, do not inclu | spouse i | is livi matic | ng with you, in on about your s | lude infor oouse. If m | mation about nore space is | t your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | 2 or non-f | filing spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | ☐ Em | ☐ Employed | | | |
| | information about additional employers. | ,, | ☐ Not employed | | | ☐ Not | ☐ Not employed | | |
| | Include part-time, seasonal, or | Occupation | Insurance Consultant(part | t-time) | | | | | |
| | self-employed work. | Employer's name | Self Employed | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed t | here? | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any li | ine, write \$0 in th | e space. In | nclude your no | n-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | n for all e | emplo | yers for that per | son on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | N/A | _ |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | _ |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 0.00 | \$_ | N/A | |

Specify:
 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

. 12. \$ 3,639.63

Combined monthly income

0.00

11.

13. Do you expect an increase or decrease within the year after you file this form?

| No. | |
|---------------|--|
| Yes. Explain: | |

| Filli | in this informa | tion to identify yo | our case: | | | | | |
|--------|--|---|------------------------|---|--|-----------------|-------------------|---|
| Debt | | John C. Sull | | | | Check | if this is: | |
| | | | | | _ | _ | an amended filing | |
| | tor 2 ouse, if filing) | | | | | | | ving postpetition chapter the following date: |
| Unite | ed States Bankr | uptcy Court for the | : NORTH | HERN DISTRICT OF OHIC |) | N | MM / DD / YYYY | |
| Case | e number | | | | | | | |
| (If kr | nown) | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | |
| | | J: Your | Exper | nses | | | | 12/15 |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people ar ich another sheet to this | | | | |
| Part | Description 1: Descri | ibe Your House | hold | | | | | |
| 1. | No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | | | | | | | |
| | = :: | - | st file Offici | al Form 106J-2, Expenses | for Separate House | hold of Debto | or 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses of | enses include f people other t d your depende | han $_{m \Box}$ | No Yes | | | | |
| Dow | <u> </u> | | | h. F.manaa | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | value of sucl | n assistance an | | government assistance i | | | Your ovn | 2000 |
| (Off | icial Form 10 | l6l.) | | | | | Your expe | 5113 63 |
| 4. | | or home owners and any rent for th | | ses for your residence. I or lot. | nclude first mortgage | 4. \$ | | 443.10 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 150.00 |
| | • | rty, homeowner's | - | | | 4b. \$ | | 0.00 |
| | | | | ıpkeep expenses | | 4c. \$ | | 100.00 |
| 5 | | owner's associat | | | mo oquity laana | 4d. \$ 5. \$ | | 0.00 |
| 5. | Auditional | nortyaye payme | ento lut yo | our residence, such as ho | me equity loans | υ. Þ | | 0.00 |

| Debtor 1 | John C. | Sullivan | Case num | ber (if known) | |
|------------------|------------------|--|-----------------------------|---------------------|--------------------------|
| 6. Util i | ities: | | | | |
| 6a. | | heat, natural gas | 6a. | \$ | 239.00 |
| 6b. | | ver, garbage collection | 6b. | | 80.00 |
| 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | | 186.00 |
| 6d. | Other. Spe | | 6d. | | 0.00 |
| | | ekeeping supplies | od. 7. | * | |
| | | | | · - | 500.00 |
| | | hildren's education costs | 8. | · | 0.00 |
| | • | ry, and dry cleaning | 9. | | 20.00 |
| | | roducts and services | 10. | · | 20.00 |
| | | ntal expenses | 11. | \$ | 200.00 |
| | | Include gas, maintenance, bus or train fare. | 12. | \$ | 200.00 |
| | not include ca | 1 7 | | | |
| | | clubs, recreation, newspapers, magazines, and bo | | · | 25.00 |
| | | ributions and religious donations | 14. | \$ | 0.00 |
| 5. Ins ı | | | | | |
| | | surance deducted from your pay or included in lines 4 | | • | |
| | . Life insura | | 15a. | · | 0.00 |
| | . Health ins | | 15b. | · - | 0.00 |
| | . Vehicle ins | | 15c. | · - | 0.00 |
| 15d | . Other insu | rance. Specify: Auto @ home insurance | 15d. | \$ | 176.47 |
| 6. Tax | es. Do not in | clude taxes deducted from your pay or included in line | es 4 or 20. | | |
| Spe | cify: | | 16. | \$ | 0.00 |
| 7. Inst | allment or le | ease payments: | | | |
| 17a | . Car payme | ents for Vehicle 1 | 17a. | \$ | 161.00 |
| 17b | . Car payme | ents for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | . Other. Spe | ecify: | 17c. | \$ | 0.00 |
| 17d | . Other. Spe | ecify: | 17d. | \$ | 0.00 |
| 8. Yo u | r payments | of alimony, maintenance, and support that you di | d not report as | · - | |
| | | our pay on line 5, Schedule I, Your Income (Offic | | \$ | 0.00 |
| 9. Oth | er payments | you make to support others who do not live with | you. | \$ | 0.00 |
| Spe | cify: | | 19. | | |
| 0. Oth | er real prope | erty expenses not included in lines 4 or 5 of this for | orm or on Schedule I: Yo | our Income. | |
| 20a | . Mortgages | on other property | 20a. | \$ | 1,623.00 |
| 20b | . Real estate | e taxes | 20b. | \$ | 0.00 |
| 20c | . Property, h | nomeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | | ce, repair, and upkeep expenses | 20d. | | 0.00 |
| | | er's association or condominium dues | 20e. | · · | 0.00 |
| | | or addediction of condominatin adde | | +\$ | |
| 1. Oth | er: Specify: | | | - φ | 0.00 |
| 2. Cal | culate your r | nonthly expenses | | | |
| | . Add lines 4 | - · | | \$ | 4,123.57 |
| 22b | . Copy line 22 | 2 (monthly expenses for Debtor 2), if any, from Officia | l Form 106J-2 | \$ | , |
| | | a and 22b. The result is your monthly expenses. | | · — | 4,123.57 |
| 220 | . Auu iii 16 226 | and 220. The result is your monthly expenses. | | Ψ | 4,123.37 |
| 3. Cal | culate your r | nonthly net income. | | | |
| | - | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,639.63 |
| | | monthly expenses from line 22c above. | 23b. | -\$ | 4,123.57 |
| | | - • | | | |
| 23c | . Subtract v | our monthly expenses from your monthly income. | | | |
| | | is your monthly net income. | 23c. | \$ | -483.94 |
| | | • | | • | |
| | | in increase or decrease in your expenses within t | | | |
| | | u expect to finish paying for your car loan within the year or o | lo you expect your mortgage | payment to increase | or decrease because of a |
| | | terms of your mortgage? | | | |
| I | No. | | | | |
| | res. | Explain here: | | | |

| Fill in this infor | | | | | |
|---------------------|--------------------------|-------------------|-----------|---|-------------------------------|
| Debtor 1 | John C. Sullivan | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | _ | k if this is an ded filing |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | Sign Below | |
|-----|--|---|
| Di | id you pay or agree to pay someone who is NOT an atto | orney to help you fill out bankruptcy forms? |
| | No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| tha | nder penalty of perjury, I declare that I have read the sur at they are true and correct. | mmary and schedules filed with this declaration and |
| Х | /s/ John C. Sullivan | X |
| | | |
| | John C. Sullivan | Signature of Debtor 2 |
| | John C. Sullivan Signature of Debtor 1 | Signature of Debtor 2 |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill in | this inform | ation to identify you | r case: | | | |
|-------------------|----------------------------|---|--|---|--|---|
| Debtor | r 1 | John C. Sullivar | 1 | | | |
| | | First Name | Middle Name | Last Name | | |
| Debtor (Spouse | | First Name | Middle Name | Last Name | | |
| United | l States Bar | kruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | | |
| Case r | number | | | | _ | Check if this is an Imended filing |
| State Be as c | complete a | of Financial | ible. If two married people | iduals Filing for B | equally responsible for sup | |
| | | ore space is needed,). Answer every que | | o this form. On the top of an | y additional pages, write you | ur name and case |
| Part 1 | Give D | etails About Your Ma | arital Status and Where Yo | ou Lived Before | | |
| 1. W | hat is your | current marital statu | ıs? | | | |
| | Married Not mar | ried | | | | |
| 2. Dı | uring the la | st 3 years, have you | lived anywhere other than | n where you live now? | | |
| | l No l Yes. List | all of the places you l | ived in the last 3 years. Do | not include where you live nov | <i>v</i> . | |
| D | ebtor 1 Pri | or Address: | Dates Debtor lived there | 1 Debtor 2 Prior Ac | Idress: | Dates Debtor 2 lived there |
| | | | | egal equivalent in a commur levada, New Mexico, Puerto R | | |
| | l No l Yes. Ma | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (| Official Form 106H). | | |
| Part 2 | Explair | n the Sources of You | ır Income | | | |
| Fil | ll in the tota | I amount of income yo | u received from all jobs and | ing a business during this you all businesses, including part ive together, list it only once u | -time activities. | ndar years? |
| □ ■ | | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | st calendar ary 1 to De | year: cember 31, 2017) | ☐ Wages, commissions, bonuses, tips | \$15,404.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Best Case Bankruptcy

Debtor 1 **John C. Sullivan** Case number (if known)

| | Debtor 1 Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Debtor 2 Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
|--|---|---|--|---|
| For the calendar year before that: (January 1 to December 31, 2016) | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | , |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | | |
|---|-----------------------------------|--|--------------------------------------|---|--|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | |
| From January 1 of current year until the date you filed for bankruptcy: | Social Security Benefits | \$17,440.00 | | | |
| | IRA distribution | \$7,727.08 | | | |
| For last calendar year: (January 1 to December 31, 2017) | Social Security Benefits | \$25,644.00 | | | |
| | IRA Distirbution | \$15,830.00 | | | |
| For the calendar year before that: (January 1 to December 31, 2016) | Social Security Benefits | \$25,560.00 | | | |
| | IRA Distibution | \$54,988.00 | | | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

- 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
 - No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

Use List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 John C. Sullivan Case number (if known)

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payn | nent for |
|-----|---|--|--|---|-------------------------------------|--|
| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | rtners; relatives of any gene control, or owner of 20% or | eral partners; partner more of their voting | rships of which you securities; and an | ı are a general p y managing age | artner; corporations nt, including one for |
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for th | is payment |
| 8. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost | | nents or transfer a | ny property on ac | count of a deb | that benefited an |
| | ■ No | | | | | |
| | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you still owe | Reason for the | |
| Par | t 4: Identify Legal Actions, Repossession | s. and Foreclosures | paid | Still Owe | include credito | i s riame |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No | cy, were you a party in any | | | | |
| | Yes. Fill in the details. Case title | Nature of the case | | | Status of the | case |
| | Case number | F | | -10 | _ | |
| | Dietech Financial LLC vs. John C. Sullivan CV 18 900608 | Foreclosure | Cuyahoga County Common Pleas Court 1200 Ontario St. Cleveland, OH 44113 | | ■ Pending □ On appeal □ Concluded | |
| | | | | | Filed July 11 | , 2018 |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below | | rty repossessed, fo | oreclosed, garnisl | ned, attached, s | seized, or levied? |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment became No | | uding a bank or fin | ancial institution, | set off any am | ounts from your |
| | Yes. Fill in the details. Creditor Name and Address | Describe the action the creditor took | | | ction was | Amount |
| | Creditor Name and Address | Describe the action the | creditor took | taken | iction was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a | | rty in the possession | on of an assignee | for the benefit | of creditors, a |
| | ■ No | | | | | |
| | ☐ Yes | | | | | |
| | | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Pai | rt 5: List Certain Gifts and Contributions | s | | | | | | | | |
|-----|--|---------|---|-----------------------------------|---------------------------|--|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No ■ Yes. Fill in the details for each gift. | | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | | Describe the gifts | Dates you gave the gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution. | | | | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | otal | Describe what you contributed | Dates you contributed | Value | | | | | |
| Pai | rt 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No | | | | | | | | | |
| | Yes. Fill in the details. | _ | | | | | | | | |
| | how the loss occurred | Include | ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | | | |
| Pai | rt 7: List Certain Payments or Transfers | i | | | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | Verner R. Rudder, Jr. Attorney at Law 183 West Aurora Rd. Northfield, OH 44067 vrr@rudderlegal.com | | \$900.00 Attorney fee \$335.00 Court filing fee | | \$1,235.00 | | | | | |
| | | | | | | | | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | | | | | | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | | | |
|-----|--|--|------------------|-----------------------|---|---|--|--|--|--|--|
| | Person Who Received Transfer Address Person's relationship to you | Description and v property transfer | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | | | | |
| | Name of trust | Description and value of the | | perty trans | Date Transfer was made | | | | | | |
| Pai | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Sto | orage Unit | s | | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | | | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe the contents | | Do you still have it? | | | | | |
| Pai | rt 9: Identify Property You Hold or Control | for Someone Else | | | | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe the property | | Value | | | | | |
| Pai | rt 10: Give Details About Environmental Info | ormation | | | | | | | | | |
| For | the nurnose of Part 10, the following definition | ns anniv | | | | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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Best Case Bankruptcy

| toxic substances, was | tes, or mate | rial into the air, | land, soil, | , surface water, | , groundwater, | , or other medium, | including s | statutes or |
|-------------------------|--------------|--------------------|-------------|------------------|----------------|--------------------|-------------|-------------|
| regulations controlling | the cleanu | p of these subst | ances, wa | astes, or materi | ial. | | | |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | hazardous material, pollutant, contaminant, or similar term. | | | | | | |
|-----|--|--|-------------------|--|--------------------|--|--|
| Rep | Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | |
| 24. | Has any governmental unit notified you that | t you may be liable or potentially liable u | nder or in vio | lation of an environm | ental law? | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environme know it | ental law, if you | Date of notice | | |
| 25. | Have you notified any governmental unit of | any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site | Governmental unit | Environme | ental law, if you | Date of notice | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | know it | | | | |
| 26. | Have you been a party in any judicial or adm | ninistrative proceeding under any enviro | nmental law? | Include settlements | and orders. | | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the o | case | Status of the case | | |
| Par | t11: Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankrupt | cy, did you own a business or have any | of the following | ng connections to an | y business? | | |
| | <u> </u> | n a trade, profession, or other activity, ei | | | | | |
| | _ | pany (LLC) or limited liability partnership | | • | | | |
| | ☐ A partner in a partnership | , | ` , | | | | |
| | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | |
| | ☐ No. None of the above applies. Go to F | Part 12. | | | | | |
| | ■ Yes. Check all that apply above and fill | in the details below for each business. | | | | | |
| | Business Name | Describe the nature of the business | | Identification number | | | |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not in | Do not include Social Security number or ITIN. | | | |
| | | | | siness existed | | | |
| | John C. Sullivan dba North Coast Claims Service | Litigation Consultant (part time) | EIN: | used social secur | ity number | | |
| | 9240 Milford Dr. Northfield, OH 44067 | Kept own financial records. Taxes prepared by Richard B. Masterson CPA | From-To | 2005 to present | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1 John C. Sullivan Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John C. Sullivan Signature of Debtor 2 John C. Sullivan Signature of Debtor 1 Date September 7, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

| Fill in this infor | mation to identify your | case: | | | |
|---------------------------------|--|---|--|------------------------------|---|
| Debtor 1 | John C. Sullivan | | | | |
| Dalatano | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DIS | TRICT OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Fo Stateme r | | n for Indiv | riduals Filing | Under Chapte | e r 7 12/15 |
| - | ividual filing under cha e claims secured by yo | | l out this form if: | | |
| you have leas | sed personal property a s form with the court w ever is earlier, unless th | and the lease has n within 30 days after | you file your bankruptcy | | t for the meeting of creditors, creditors and lessors you list |
| | eople are filing together | r in a joint case, bo | th are equally responsible | le for supplying correct in | formation. Both debtors must |
| write y | and accurate as possib our name and case nur our Creditors Who Hav | mber (if known). | s needed, attach a separa | ate sheet to this form. On t | the top of any additional pages, |
| | | | : Creditors Who Have Cla | aims Secured by Property | (Official Form 106D), fill in the |
| information be | | | | do with the property that | |
| | | | | | |
| Creditor's D | itech Financial LLC | | ■ Surrender the proper | rty. | ■ No |
| name: | | | Retain the property | | □Yes |
| Description of | 876 Lincoln Blvd. I | | ☐ Retain the property a Reaffirmation Agree | | — 100 |
| property securing debt: | 44146 Cuyahoga (Situated in the City County of Cuyaho of Ohio, and know Sublot 64 in the Yo | y of Bedford, ga and State n as being | ☐ Retain the property a | and [explain]: | |
| | Heights subdivivio | on of part of | | | |
| | No. 36 a | ownsnip Lot | | | _ |
| | | ownsnip Lot | ☐ Surrender the proper | - | |
| Creditor's F name: | No. 36 a | ownsnip Lot | ☐ Surrender the proper ☐ Retain the property a | and redeem it. | No ■ Yes |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

| Debtor 1 _ | John C. Sullivan | Case number (if known) | |
|---|---|--|-----------------------------------|
| property securing | Northfield Square Subdivision debt: No. 6 of part of Original Northfield Townshi | Retain the property and [explain]: | _ |
| Part 2: L | ist Your Unexpired Personal Property L | _eases | |
| or any une | expired personal property lease that you mation below. Do not list real estate lea | u listed in Schedule G: Executory Contracts and Unexpire ses. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(| e lease period has not yet ended. |
| Describe y | our unexpired personal property leases | S | Will the lease be assumed? |
| Lessor's na Description Property: | | | □ No □ Yes |
| Lessor's na | me: | | □ No |
| Description Property: | | | ☐ Yes |
| Lessor's na | me. | | □ No |
| Description Property: | | | ☐ Yes |
| Lessor's na | | | □ No |
| Description Property: | of leased | | ☐ Yes |
| _essor's na | | | □ No |
| Description Property: | of leased | | ☐ Yes |
| _essor's na | | | □ No |
| Description Property: | of leased | | ☐ Yes |
| Lessor's na | | | □ No |
| Description Property: | or leased | | ☐ Yes |
| Part 3: S | ign Below | | |
| | Ity of perjury, I declare that I have indic at is subject to an unexpired lease. | ated my intention about any property of my estate that se | cures a debt and any personal |
| X /s/ Jo | hn C. Sullivan | x | |
| | C. Sullivan | Signature of Debtor 2 | |
| Signat | ure of Debtor 1 | | |
| Date | September 7, 2018 | Date | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

| Fill in t | his information to identify your case: | | | irected in this form and | in Form |
|---------------------|---|--|--|--|---------------------------------|
| Debtor | John C. Sullivan | | 2A-1Supp: | | |
| Debtor (Spouse, | | | ■ 1. There is no pres | umption of abuse | |
| United | States Bankruptcy Court for the: Northern District | of Ohio | applies will be n | o determine if a presun nade under <i>Chapter 7 l</i> | • |
| Case r | number | | ☐ 3. The Means Test | icial Form 122A-2). does not apply now be service but it could ap | |
| | | | | • | bly later. |
| ∩ffic | cial Form 122A - 1 | | ☐ Check if this is a | n amended ming | |
| | pter 7 Statement of Your Cu | rrant Manthly Inc | omo | | 40/45 |
| Giia | pter / Statement of Your Cu | Trent Monthly inc | Joine | | 12/15 |
| attach a case nu | omplete and accurate as possible. If two married people separate sheet to this form. Include the line number to mber (if known). If you believe that you are exempted from military service, complete and file Statement of Exemple Calculate Your Current Monthly Income | which the additional information a om a presumption of abuse becau | applies. On the top of anse you do not have prin | ny additional pages, write narily consumer debts o | e your name and r because of |
| 1. W | /hat is your marital and filing status? Check one of | only. | | | |
| _ | Not married. Fill out Column A, lines 2-11. | ···· y· | | | |
| | Married and your spouse is filing with you. Fill o | out both Columns A and B. lines | 2-11. | | |
| _ | Married and your spouse is NOT filing with you | | | | |
| | ☐ Living in the same household and are not leg | • • | lumns A and B, lines 2 | 2-11. | |
| | ☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evad | legally separated under nonban | kruptcy law that applie | es or that you and your | |
| 101(the 6 | n the average monthly income that you received from al 10A). For example, if you are filing on September 15, the 6- 6 months, add the income for all 6 months and divide the total ses own the same rental property, put the income from that | month period would be March 1 through the month period would be March 1 through the month included the month period would be month to the month period would be month period would be month period would be month period would be march 1 through the month period would be month period woul | ugh August 31. If the amode any income amount m | ount of your monthly incomore than once. For example | e varied during e, if both |
| | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| | our gross wages, salary, tips, bonuses, overtime ayroll deductions). | , and commissions (before all | \$ 0.00 | \$ | |
| 3. A | limony and maintenance payments. Do not include olumn B is filled in. | e payments from a spouse if | \$ 0.00 | \$ | |
| o fr a | Il amounts from any source which are regularly p f you or your dependents, including child suppor om an unmarried partner, members of your househo nd roommates. Include regular contributions from a s led in. Do not include payments you listed on line 3. | t. Include regular contributions ld, your dependents, parents, | \$ 0.00 | \$ | |
| | et income from operating a business, profession | , or farm | | | |
| | | Debtor 1 | | | |
| | ross receipts (before all deductions) \$ | 371.31 | | | |
| | rdinary and necessary operating expenses -\$ | 0.00 Copy | | | |
| | et monthly income from a business, rofession, or farm \$ | 371.31 here -> | \$ 371.31 | \$ | |
| • | et income from rental and other real property | | | | |
| | | Debtor 1 | | | |
| | ross receipts (before all deductions) | \$ <u>0.00</u> -\$ <u>0.00</u> | | | |
| | rdinary and necessary operating expenses | 0.00 | \$ 0.00 | \$ | |
| | et monthly income from rental or other real property | \$ Copy here -> | \$ 0.00 | \$ | |
| | | | | | |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

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Best Case Bankruptcy

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | | |
|------|---|--|----------|-------------------|--------------|-----------------------------------|-------------|--------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | • | |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: | t received was a benefi | t under | · | | · | | |
| | | 0.0 | 00 | | | | | |
| | For you \$ For your spouse \$ | | | | | | | |
| 9. | Pension or retirement income. Do not include any ambenefit under the Social Security Act. | nount received that was | s a | \$ 1,0 | 88.32 | \$ | | |
| 10. | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or paymen manity, or international a separate page and pu | ts or | \$ | 0.00 | \$ | | |
| | | | | \$ | 0.00 | \$ | | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total | | \$ | 1,459.63 | + [\$ | | | ,459.63 |
| Part | Determine Whether the Means Test Applies to | o You | | | | | income | rent monthly |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 11 | | Сору | line 11 h | nere=> | \$1 | ,459.63_ |
| | Multiply by 12 (the number of months in a year) | | | | | | x 12 | |
| | 12b. The result is your annual income for this part of the | e form | | | | 12b. | \$17 | ,515.56 |
| 13. | Calculate the median family income that applies to | you. Follow these step | s: | | | | ` | |
| | Fill in the state in which you live. | ОН | | | | | | |
| | Fill in the number of people in your household. | 1 | | | | | | |
| | Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | online using the link sp | | in the separa | | 13. tions | \$48 | ,596.00 |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. Of Go to Part 3. | n the top of page 1, ch | eck box | 1, There is n | o presum | ption of abuse | э. | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2, | The pre | esumption of | abuse is | determined by | Form 122 | 4-2. |
| Part | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information or | this sta | atement and i | n any atta | achments is tru | ue and corr | ect. |
| | X /s/ John C. Sullivan | | | | • | | | |
| | John C. Sullivan Signature of Debtor 1 | | | | | | | |
| | Date September 7, 2018 MM / DD / YYYY | | | | | | | |
| | If you checked line 14a, do NOT fill out or file Forn | n 122A-2. | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and fi | | | | | | | |
| | ii you checked line 14b, iiii out Foitti 122A-2 and ti | ne it with this form. | | | | | | |

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

| | Nor | rthern District of Ohio | | | |
|-------|---|---|---|-------------------------------|--------|
| In re | John C. Sullivan | | Case No. | | |
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR DE | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered | or to |
| | For legal services, I have agreed to accept | | \$ | 900.00 | |
| | Prior to the filing of this statement I have received | | | 900.00 | |
| | Balance Due | | | 0.00 | |
| | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| , | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| | ■ I have not agreed to share the above-disclosed compe | nsation with any other person | unless they are mem | bers and associates of my la | w firi |
| | ☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the nam | | | | 1. A |
| | n return for the above-disclosed fee, I have agreed to ren | der legal service for all aspec | ts of the bankruptcy c | ase, including: | |
| 1 | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor [Other provisions as needed] | ment of affairs and plan which is and confirmation hearing, a | h may be required; nd any adjourned hea | rings thereof; | |
| | Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou | ns as needed; preparatior | | | |
| | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding. | does not include the followin chargeability actions, jud | g service: icial lien avoidanc | es, relief from stay actio | ns o |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement fo | r payment to me for re | epresentation of the debtor(s |) in |
| S | eptember 7, 2018 | /s/ Verner R. Ruc | lder, Jr. | | |
| D | ate | Verner R. Rudde | | | |
| | | Verner R. Rudde | <i>ey</i> r Jr. Attornev at La | aw | |
| | | 183 W. Aurora R | d. | ••• | |
| | | | | | |
| | | | 2V - X XIII-AKX- X5AA | | |
| | | 330-467-3002 Fa | | | |
| s | eptember 7, 2018 | Verner R. Rudde Signature of Attorn Verner R. Rudde 183 W. Aurora R Northfield, OH 44 | r, Jr. ^{ey} r Jr. Attorney at La d. | aw | |

United States Bankruptcy Court Northern District of Ohio

| In re | John C. Sullivan | | Case No. | |
|--------|----------------------------------|---|---------------------|-----------------------|
| | | Debtor(s) | Chapter | 7 |
| | VER | IFICATION OF CREDITOR | MATRIX | |
| The ab | ove-named Debtor hereby verifies | that the attached list of creditors is true and o | correct to the best | of his/her knowledge. |
| Date: | September 7, 2018 | /s/ John C. Sullivan | | |
| | | Signature of Debtor | | |

Ditech Financial LLC 2100 E. Elliot Road, Bldg. 94 Tempe, AZ 85284

Ditech Financial LLC 2100 E. Elliot Rd., Building 94 Tempe, AZ 85284

Ditech Financial LLC c/o David J. Demers, Esq. Cooke Demers, LLC 260 Market St., Suite F New Albany, OH 43054

Ditech Financial LLC P.O. Box 6172 Rapid City, SD 57709-6172

Fifth Third Bank 5050 Kingsley Dr. Cincinnati, OH 45227

Fifth Third Bank 5050 Kingsley Dr. Cincinnati, OH 45227

Fifth Third Bank 5050 Kingsley Dr. Cincinnati, OH 45263

Huntington National Bank PO Box 1558 Columbus, OH 43216

Huntington National Bank PO Box 1558 Columbus, OH 43216

Kohls/CapOne PO Box 3115 Milwaukee, WI 53201

Synchrony Bank PO Box 960061 Orlando, FL 32896-0061 Synchrony Bank/Care Credit P.O. Box 965036 Orlando, FL 32896